

## State of Rhode Island and Providence Plantations Rhode Island Department of Children, Youth and Families

## **DCYF** Licensing Waiver or Variance Request Form

(please type or print)

Program Information			
Program/Provider Name			
Location (Street, City, State and Zip Code)			
Mailing Address (if different from above)			
Email Address (required)			
Waiver or Variance Information			
Date of waiver or variance request			
Who is the primary contact regarding this waiver or variance request?			
Is a waiver or variance being requested?	☐ Waiver ☐ Variance		
What is the anticipated date of full regulatory compliance?			
Please identify the set of regulations for which you are requesting a waiver or variance	☐ Child Care Center and School Age Program Regulations for Licensure ☐ Family Child Care Home Regulations for Licensure ☐ Group Family Child Care Home Regulations for Licensure ☐ Residential Child Care Regulations for Licensure ☐ Foster Care and Adoptive Regulations for Licensure ☐ Child Placing Regulations for Licensure		
Please identify the specific regulation for which you a requesting a waiver or variance. Each waiver or variance requested should be submitted on a separate Waiver or Variance Request Form.			
Please describe the program or provider's current status in relation to the regulation for which a waiver or variance is being requested. Include additional documentation as necessary.			
Address the reasons why the program or provider is unable to meet the regulation.			
Present any additional information which you would like the Licensing Administrator or designee to consider when reviewing the waiver or variance request.			

Tasks and Timelines Task Timeline Evidence of Progress		
Task	Timeline	Evidence of Progress

Completed Waiver or Variance Request Forms should be emailed to: Child Care: Stefanie Spano, Deputy Chief of Licensing for Child Care (<u>stefanie.spano@dcyf.ri.gov</u>) Foster Care: Margy Ryan, Deputy Chief of Licensing for Foster Care (<u>margy.ryan@dcyf.ri.gov</u>) Other Licensing: Veronica Davis, Chief of Licensing and Regulation (<u>veronica.davis@dcyf.ri.gov</u>)

The DCYF Licensing Administrator or designee with review the Waiver or Variance Request Form, request additional documentation as necessary, and will make a written determination within thirty (30) days of receipt of the request.